

General

Title

Ovarian cancer: proportion of patients with advanced epithelial ovarian cancer (FIGO stage 3c or 4) undergoing delayed primary surgery after neo-adjuvant chemotherapy where optimal cytoreduction is achieved (residual disease less than 1 cm).

Source(s)

NHS Scotland, Scottish Cancer Taskforce. Ovarian cancer clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Jan. 29 p. [11 references]

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Outcome

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the proportion of patients with advanced epithelial ovarian cancer (International Federation of Gynecologists and Obstetricians [FIGO] stage 3c or 4) undergoing delayed primary surgery after neo-adjuvant chemotherapy where optimal cytoreduction is achieved (residual disease less than 1 cm).

This Cancer Quality Performance Indicator (QPI) measure is separated into two parts. Please refer to the related NQMC measure summary, [Ovarian cancer: proportion of patients with advanced epithelial ovarian cancer \(FIGO stage 3c or 4\) undergoing delayed primary surgery after neo-adjuvant chemotherapy](#).

Note from the National Quality Measures Clearinghouse: This measure is part of the Cancer Quality Performance Indicators (QPIs) collection. For more information, including a complete list of QPI measure sets, please visit the [Healthcare Improvement Scotland Web site](#).

Rationale

Improved patient outcomes are observed in patients with no visible residual disease following surgical resection. The objective of performing surgery on women with epithelial ovarian cancer, whether before chemotherapy or after neo-adjuvant chemotherapy, is complete resection of all macroscopic disease (National Institute for Health and Clinical Excellence [NICE], 2011) although this is not always possible in patients with advanced disease because of widespread involvement of peritoneal surfaces, bowel mesentery and serosa of bowel.

Neo-adjuvant chemotherapy followed by surgery is a reasonable alternative to primary debulking surgery in stage 3c and 4 disease (Morrison et al., 2012).

Evidence for Rationale

Morrison J, Haldar K, Kehoe S, Lawrie TA. Chemotherapy versus surgery for initial treatment in advanced ovarian epithelial cancer. Cochrane Database Syst Rev. 2012 Aug 15;15(8):CD005343. [PubMed](#)

National Institute for Health and Care Excellence (NICE). Ovarian cancer: recognition and initial management. London (UK): National Institute for Health and Care Excellence (NICE); 2011 Apr 21. 33 p. (NICE clinical guideline; no. 122).

NHS Scotland, Scottish Cancer Taskforce. Ovarian cancer clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Jan. 29 p. [11 references]

Primary Health Components

Advanced epithelial ovarian cancer; primary surgery; neo-adjuvant chemotherapy; cytoreduction

Denominator Description

All patients with advanced epithelial ovarian cancer (International Federation of Gynecologists and Obstetricians [FIGO] stage 3c or 4) undergoing delayed primary surgery after neo-adjuvant chemotherapy (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

Number of patients with advanced epithelial ovarian cancer (International Federation of Gynecologists and Obstetricians [FIGO] stage 3c or 4) undergoing delayed primary surgery with residual disease less than 1 cm (see the related "Numerator Inclusions/Exclusions" field)

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

A systematic review of the clinical research literature (e.g., Cochrane Review)

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

The collection of data is piloted on a small number of patient records using a paper data collection form produced by the Information Services Division (ISD). The aim is to identify any anomalies or difficulties with data collection prior to full implementation. At least one NHS board in each Regional Cancer Network participates in the pilot.

Evidence for Extent of Measure Testing

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p.

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Ambulatory/Office-based Care

Ambulatory Procedure/Imaging Center

Hospital Inpatient

Hospital Outpatient

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

Statement of Acceptable Minimum Sample Size

Unspecified

Target Population Age

Unspecified

Target Population Gender

Female (only)

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Getting Better

Living with Illness

IOM Domain

Effectiveness

Data Collection for the Measure

Case Finding Period

Unspecified

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Clinical Condition

Therapeutic Intervention

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

All patients with advanced epithelial ovarian cancer (International Federation of Gynecologists and Obstetricians [FIGO] stage 3c or 4*) undergoing delayed primary surgery after neo-adjuvant chemotherapy

*Final stage of disease as agreed by multidisciplinary team (MDT)

Exclusions

None

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Number of patients with advanced epithelial ovarian cancer (International Federation of Gynecologists and Obstetricians [FIGO] stage 3c or 4) undergoing delayed primary surgery with residual disease less than 1 cm

Exclusions

None

Numerator Search Strategy

Fixed time period or point in time

Data Source

Electronic health/medical record

Paper medical record

Type of Health State

Physiologic Health State (Intermediate Outcome)

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Prescriptive Standard

Target: 65%

The tolerances allowed by the target set reflect variance in individual patient response to chemotherapy.

Evidence for Prescriptive Standard

NHS Scotland, Scottish Cancer Taskforce. Ovarian cancer clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Jan. 29 p. [11 references]

Identifying Information

Original Title

QPI 8 (ii) – delayed primary surgery.

Measure Collection Name

Cancer Quality Performance Indicators (QPIs)

Measure Set Name

Ovarian Cancer

Submitter

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Developer

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Funding Source(s)

Scottish Government

Composition of the Group that Developed the Measure

Ovarian Cancer QPI Development Group

Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2016 Jan

Measure Maintenance

The Cancer Quality Performance Indicators (QPIs) will be kept under regular review and be responsive to changes in clinical practice and emerging evidence.

Date of Next Anticipated Revision

2017 Aug

Measure Status

This is the current release of the measure.

Measure Availability

Source document available from the [Healthcare Improvement Scotland Web site](#) .

For more information, contact the Healthcare Improvement Scotland at Gyle Square, 1 South Gyle Crescent, Edinburgh, Scotland EH12 9EB; Phone: 0131 623 4300; E-mail: comments.his@nhs.net; Web site: www.healthcareimprovementscotland.org/ .

Companion Documents

The following is available:

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p. This document is available from the [Healthcare Improvement Scotland Web site](#) .

NQMC Status

This NQMC summary was completed by ECRI Institute on April 25, 2017. The information was verified by the measure developer on May 23, 2017.

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Production

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